

Part 403 – Employment
Subpart H – Career Intern Program
SUBPART 4 – EXHIBIT

CO403-190

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|---|----------------------------|-------------------------|
| INSTRUCTIONS: The supervisor of record is responsible for forwarding the completed form to the HR Office for appropriate action. For promotion or target position assignment, the original of this form should be attached to a request for personnel action and forward to the HR office. | | |
| NAME OF INTERN | Current Position and Grade | Organization & Location |
| EVALUATION PANEL STATEMENT AND RECOMMENDATION | | |
| <p>We, the undersigned members of an evaluation panel, established in accordance with the <i>NRCS/CO Federal Career Intern Program</i>, attest that we are familiar with the contents of the program and have examined the evidence developed to show the intern's progress in relation to his/her Individual Development Plan.</p> <p>By oral interview of the intern, and/or by inquiring of persons with whom he/she has come in contact on his/her work assignments, and by review of documentary evidence, we find that the intern has achieved an acceptable level of progress. We recommend, in accordance with the NRCS/CO Federal Career Intern Program, that the intern:</p> <p style="text-align: center;">_____ be promoted to the next appropriate grade</p> <p style="text-align: center;">_____ be assigned to the target position</p> | | |
| PANEL MEMBERS SIGNATURE | TITLE | DATE |
| <div style="margin-bottom: 10px;">1. _____</div> <div style="margin-bottom: 10px;">2. _____</div> <div style="margin-bottom: 10px;">3. _____</div> <div style="margin-bottom: 10px;">4. _____</div> | | |
| <p>OFFICE OF HUMAN RESOURCE VERIFICATION:</p> <p>I verify that the requirements of the <i>NRCS/CO Federal Career Intern Program</i>, which are applicable to this intern, were met.</p> | | |
| Signature & Title | | Date |

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| EVALUATION PANEL SUMMARY | | |
|---|---------------|-----------------|
| INTERN'S NAME | DATE OF PANEL | PERIOD COVERING |
| EVALUATION PANEL SUMMARY | | |
| SECTION I SIGNIFICAN ACCOMPLISHMENTS/GOALS ACHIEVED BY INTERN | | |
| | | |
| SECTION II. COMMENTS (Please check appropriate box) | | |
| <p>By oral interview of the intern and review of the documentary evidence, we find that he/she</p> <p>_____ is making satisfactory progress. (Please summarize comments)</p> <p>_____ is not making satisfactory progress. In order to assist the trainee achieve an acceptable level of progress we recommend:</p> <p>_____ an extension of the training period for _____ days</p> <p>_____ development of a Performance Improvement Plan in accordance with the NRCS Performance Management Policy. (Summarize comments under Areas of Concern below)</p> <p>Other (summarize comments under Areas of Concern below)</p> | | |
| <div style="display: flex;"><div style="width: 5%; text-align: right; padding-right: 10px;">1.</div><div style="border-bottom: 1px solid black; flex-grow: 1;"></div></div> <div style="display: flex;"><div style="width: 5%; text-align: right; padding-right: 10px;">2.</div><div style="border-bottom: 1px solid black; flex-grow: 1;"></div></div> <div style="display: flex;"><div style="width: 5%; text-align: right; padding-right: 10px;">3.</div><div style="border-bottom: 1px solid black; flex-grow: 1;"></div></div> <div style="display: flex;"><div style="width: 5%; text-align: right; padding-right: 10px;">4.</div><div style="border-bottom: 1px solid black; flex-grow: 1;"></div></div> | | |

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